

AO 440 (Rev. 06/12) Summons in a Civil Action (Page 2)

Civil Action No. 8:17-cv-00083

PROOF OF SERVICE*(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (l))*

This summons for (name of individual and title, if any) Benjamin Iversen
 was received by me on (date) March 29, 2017.

☐ I personally served the summons on the individual at (place) _____
 on (date) _____; or

☐ I left the summons at the individual's residence or usual place of abode with (name) _____,
 a person of suitable age and discretion who resides there,
 on (date) _____, and mailed a copy to the individual's last known address; or

☐ I served the summons on (name of individual) _____, who is
 designated by law to accept service of process on behalf of (name of organization) _____
 on (date) _____; or

☐ I returned the summons unexecuted because _____; or

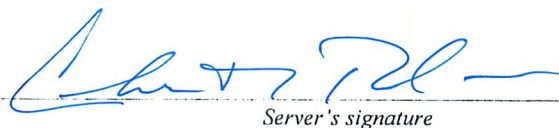
☒ Other (specify):

Summons was served on Defendant, Benjamin Iversen, by United States certified mail, postage of \$6.98 prepaid,
 on April 3, 2017, as reflected on the attached certified mail signature card.

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00.

I declare under penalty of perjury that this information is true.

Date: April 5, 2017


 Server's signature

Christopher J. Tjaden, Attorney

Printed name and title

Gross & Welch, P.C., L.L.O.
 1500 Omaha Tower
 2120 South 72nd Street
 Omaha, NE 68124

Server's address

Additional information regarding attempted service, etc:

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Benjamin Iversen
LaVista Police Department
7701 South 90th St.
LaVista, NE 68128



9590 9402 2312 6225 3136 08

2. Article Number (Transfer from service label)

7015 1520 0003 3965 2489

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X B. Thompson

☒ Agent
☐ Addressee

B. Received by (Printed Name)

B. Thompson

C. Date of Delivery

4-3-17

D. Is delivery address different from item 1? ☐ Yes
 If YES, enter delivery address below: ☒ No

3. Service Type

- ☐ Adult Signature
- ☐ Adult Signature Restricted Delivery
- ☒ Certified Mail®
- ☐ Certified Mail Restricted Delivery
- ☐ Collect on Delivery
- ☐ Collect on Delivery Restricted Delivery
- ☐ Insured Mail
- ☐ Insured Mail Restricted Delivery (over \$500)

- ☐ Priority Mail Express®
- ☐ Registered Mail™
- ☐ Registered Mail Restricted Delivery
- ☐ Return Receipt for Merchandise
- ☐ Signature Confirmation™
- ☐ Signature Confirmation Restricted Delivery